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DATE: October 6, 2003

RECIPIENT INFORMATION

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To:

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From:

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Art Unit: 3761

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Voice Tel. No.: Fax Tel. No.:

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Sent By:

Sandra

Your Ref.:

09/937,326

Our Ref.:

019219-013

**Total Pages:** 

15 pages

## **MESSAGE:**

Please see attached response to the Official Action mailed June 6,2003.

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Patent Attorney Docket No. 019219-013

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1.

In re Patent Application of

Arie Comelis BESEMER et al.

Application No.: 09/937,326

Filing Date:

September 25, 2001

Title: Hygienic Absorbent with Odour Control

Group Art Unit:

3761

Examiner:

Jamisue A. WEBB

Confirmation No.: 9428

## AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclose	ed is	а гер	ly foi	r the	above-identified	patent	application.
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X	A Petition for Extension of Time is also enclosed.						
	Terminal Disclaimer(s) and the \$\infty\$\$ \$55.00 (2814) \$\infty\$\$ \$110.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.						
	Also enclosed is/are						
	Small entity status is hereby daimed.						
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$385.00 (2801) \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).						
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.						
	Applicant(s) previously submitted						
	on						
	Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.						
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed						



AMENDMENT/REPLY TRANSMITTAL LETTER

Attorney Docket No. 019219-013 Application No. <u>09/937,326</u> No additional claim fee is required. An additional claim fee is required, and is calculated as shown below. AMENDED CLAIMS Highest No. of Nο Claims Extra Claims Rate Additional Fee of Claims Previously Paid For Total Claims 10 MINUS 0 20  $\times$  \$18.00 (1202) = \$ 0.00 Independent Claims 2 MINUS 0 x \$86.00 (1201) = \$ 0.00 If Amendment adds multiple dependent claims, add \$290.00 (1203) Total Claim Amendment Fee \$ 0.00 Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee \$ 0.00 TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT \$ 0.00 A total fee in the amount of \_ is enclosed. to Deposit Account No. 02-4800. The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1. 20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate. Respectfully submitted. BURNS, DOANE, SWECKER & MATHIS, L.L.P. P.O. Box 1404 Alexandria, Virginia 22313-1404 (919) 941-9240 Date: October 6, 2003 Registration No. 32,176 I hereby certify that this correspondence is being by facsimile transmission to the Commissioner for Patents, P.O. Box 1450. Alexandria, VA 22313-1450, to the following facsimile number:

Sandra B. Payer
Typed Name:

BURNS DOANE

AMENDMENT/REPLY TRANSMITTAL LETTER

Date of Transmission: October 6, 2003

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